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APPLICANTS

Arne Briest, Karlsruhe, GERMANY;

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** FOREIGN APPLICATIONS *****

GERMANY 10 2004 016 397.9 03/26/2004

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY **

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ADDRESS

ANTONELLI, TERRY, STOUT & KRAUS, LLP
 1300 NORTH SEVENTEENTH STREET
 SUITE 1800
 ARLINGTON, VA 22209-3873
 UNITED STATES

TITLE

Application Aid for the Treatment of Bone Defects

FILING FEE RECEIVED 920	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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